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Attorney Docket Number | NIDN-73175 DECLARATION FOR UTILITY OR Wolfe First Named Inventor DESIGN PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) 09 Application Number / 914,162 23-Aug-2001 Filing Date □ Declaration ☐ Declaration Submitted Submitted after Initial To be assigned Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial Filing Examiner Name To be assigned required)

As a below named inv	entor, I hereby declare that								
My residence, post offic	e address, and citizenship an	e as stated below next to m	у пате.						
I believe I am the origina names are listed below)	al, first and sole inventor (if or of the subject matter which is	nly one name is listed below s claimed and for which a o	v) or an onginal, atent is sought o	first and joint inventor in the invention entitle	r (if plurat				
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I acknowledge the duty to	disclose information which is	material to patentability as	defined in 37 Cf	FR 1.56.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Country	Foreign Filing Oate (MM/DD/YYYY)	Priority Not Claimed	Certified Copy A	Altached?				
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As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to translational trademark Office connected therewith: Customer Number 22840							omer Gre ere			
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Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.										
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Henry		_		Wolf	Э					
Inventor's Signature							,	Date		
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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

Name of Addition	nal Joint Inventor, if any	:			A petitic	on has been file	ed for th	nis unsign	ed inv	entor
Given Na	me (first and middle [if any])			Family Name or Surname						
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Inventor's Signature						Date				
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Christo	opher			В	lack					
Inventor's Signature	CAU	风	E.		2			Date		9/21/01
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Notarial Seal Elaine C. DePaul, Notary Public Tredyffrin Twp., Chester County

Notarial Seal Elaine C. DePaul, Notary Public Tredyffrin Twp., Chester County My Commission Expires Oct. 20. 2003

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ADDITIONAL INVENTOR(S) **DECLARATION** Supplemental Sheet Page 2 of 2 Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle (if any)) Family Name or Surname Storflor Harry Inventor's Signature Date NO NO Residence: City Citizenship Nycoveien 1-2 Post Office Address N-0401 Oslo Norway Post Office Address City State ZIP Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle (if any)) Family Name or Surname Stokke Geir Inventor's Signature Date NO NO Residence: City Nycoveien 1-2 Post Office Address N-0401 Oslo Norway Post Office Address City ZIP Country Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Halldis Hellebust inventor's Signature Date NO NO Residence: City Citizenship State Nycoveien 1-2 Post Office Address N-0401 Oslo Norway Post Office Address

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Attorney Docket Number NIDN-73175 DECLARATION FOR UTILITY OR Wolfe First Named Inventor **DESIGN** PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) Application Number 09 / 914,162 23-Aug-2001 Filing Date ☐ Declaration ☑ Declaration OR To be assigned Submitted Submitted after Initial Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial Filing **Examiner Name** To be assigned required) ·

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As a below named inve	entor, I hereby declare that:								
My residence, post office	My residence, post office address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
Process for Pr	oduction Diphthe	ria Toxin							
the specification of which is attached hereto OR	: (111.	le of the Invention)							
was filed on (MM/	DD/YYYY) <mark>02/25/200</mark>	0 as Unite	d States Applica	ation Number or F	CT International				
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I hereby state that I have it	eviewed and understand the	contents of the above iden	,	on, including the c	-				
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I acknowledge the duty to	disclose information which is	material to patentability as	defined in 37 CI	FR 1.56.					
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
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DECLARATION — Utility or Design Patent Application

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Inventor's Signature	Henry R	W.J			······			Date	9/18/01
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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

Name of Addition	nal Joint Inventor, if a	ıny:			A petitio	on has been file	ed for th	is unsigr	ned in	ventor
Given Na	ame (first and middle [if an	ył)		Family Name or Surname						
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Residence: City	;	State			Country	CA		Citizensi	hip	CÁ
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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2

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NIDN-73175 Attorney Docket Number DECLARATION FOR UTILITY OR Wolfe First Named Inventor DESIGN PATENT APPLICATION COMPLETE IF KNOWN (37 CFR 1.63) 914,162 09 Application Number 23-Aug-2001 Filing Date □ Declaration ☑ Declaration OR Submitted Submitted after Initial To be assigned Group Art Unit Filing (surcharge (37 CFR 1.16 (e)) with Initial Filing Examiner Name To be assigned required)

As a below named inve	entor, I hereby declare that:							
My residence, post office	e address, and citizenship are	e as stated below next to my	y name.					
I believe I am the onginal, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
Process for Pr	oduction Diphthe	eria Toxin						
the specification of which (Title of the Invention) is attached hereto OR was filed on (MM/DD/YYYY) 02/25/2000 as United States Application Number or PCT International								
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I hereby state that I have	I hereby state that I have reviewed and understand the contents of the above identified energication including the device.							
	amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Oate (MM/DD/YYYY)	Priority Not Claimed	Certified Co YES	py Attached?			
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DECLARATION Utility or Design Patent Application

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Additional in	ventor	s are being name	d on	the 2 supt	olemental	Additi	onal Ir	nventor(s) sh	eet(s) PTO	/SB/02A attac	hed hereto			

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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

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Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor														
Given Name (first and middle (if any])						Family Name or Surname								
Fahar						Merchant								
Inventor's Signature	Tohar week					44	Da	te	1=	7/Dec/0	1			
Residence: City	Edmonton	3	Country CA				nship	(CA					
Post Office Address	1350-119B Street, Edmonton													
Post Office Address	T6J 7H5 AI	T6J 7H5 Alberta, Canada												
City			State			ZIP		Countr	у					
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Rosemi	Rosemina						Merchant							
Inventor's Signature	I. K. Melle					int	Date			17000	φ			
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Christopher					E	Black							1	
Inventor's Signature							Da	ate						
Residence: City		ıs	tate			Country	US		Citize	nship	l	JS		
Post Office Address	1211 Windmill Circle										1			
Post Office Address	Norristown, Pennsylvania 19403 US													
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ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2

Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor													
Given Name (first and middle [if any])					Family Name or Surname								
Harry				Storflor									
M. Shops							Date	2	26 Sept 01				
	State			Country	NO		Citizenship		NO				
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Greis O.				Date		13.5cm.01							
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Supplemental Sheet DECLARATION

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Inventor's Signature									Di	ate				
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Inventor's Signature	Halldi	Hell	ebl	NA.	_				Dat	te	ia. Sept.			
Residence: City ·	U	100	State	1	c	Country	NO		Citizen		NO			
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